ing the prognosis is unfavorable since it is most frequently observed in idiots and imbeciles.

2. *Auscultation of Muscles in Paralysis.*—After quoting freely from some previous works of her own, especially from one, "The Functional Duality of Muscle," the authoress considers the study of Link upon the muscular sound. This is the sound which is heard when listening over a contracted muscle with the stethescope, or better with the phonendoscope. This sound in the healthy muscle voluntarily contracted is found to correspond to 22-24 vibrations per second. In complete flaccid paralyses this sound cannot be produced, though when the paralysis is incomplete it is heard more or less faintly, in proportion to the number of fibers capable of functionating which are left. The sound is also more feeble in any condition giving rise to impaired muscular force. It is heard in paralysis agitans, in tremors, and is very intense in tetanus. On the contrary in muscles having undergone contracture through nutritional causes (*e. g.*, in contracture after hemiplegia) it is not heard. If the patient is able to make any voluntary movement, however, it is immediately produced.

Normal muscle excited by the faradic current gives a note whose pitch is dependent upon the number of interruptions per second of the apparatus. In muscles showing complete reaction of degeneration neither the galvanic nor the faradic current produces any sound. The authoress thinks that these observations confirm the theory which she has put forward; namely, that the muscular contraction is composed of two elements, the contraction of the anisotropic substance, which is intermittent and produces the muscular sound, and that of the sarcoplasm which is continuous and silent. She even suggests that we can take a step further in advance, assuming that these two kinds of contraction are under the influence of innervations from different points, that of the anisotropic substance coming from the higher, the voluntary centers, in the brain, that of the sarcoplasm, from the lower or medullary centers.

(Vol. XI., No. 15, 1906.)

1. A Rare Form of Pseudoesthesia. MATTIROLO.

1. *Pseudoesthesia.*—By "pseudoesthesia" the author understands a false though physiological mental perception of colors, sounds, odors, etc., which are not real, but are nevertheless evoked by a real perception in the realm of another sense. He narrates the case of a man of thirty years of age, in good health, presenting no psychical anomaly, not neurasthenic, "in the true sense of the word," though a little excitable, and easily depressed. This man claims to have had since early childhood the following anomaly: The hearing, or even the reproduction of the mental images of certain words, are invariably accompanied by the sensations of the taste of certain substances as of fruits, vegetables, meats, etc.; for instance, the word Russia calls up taste of pears; admit, tomato sauce; captain, roast fowl, etc. The man is an Italian, but speaks French as well as he does his own language, and knows German, though this he learned much later than French. The corresponding French and Italian words equally arouse the gustatory sensations, not so the German words. He has the idea that words containing a number of labial and dental consonats give rise to tastes which should be perceived on the anterior part of the tongue and palate, while those in which gutturals abound cause tastes usually perceived by the posterior part of the tongue and palate.

(ALLEN) Trenton.

Journal de Psychologie Normale et Pathologique

(Third Year, No. 3. May-June, 1906.)

1. The Sense of the Mysterious Among the Insane. G. R. D'ALLONNES.
2. Modern Witchcraft. A. MARIE and M. VIOLLET.
3. Some Time-Reactions Among the Insane. CL. CHARPENTIER.

1. *The Sense of the Mysterious Among the Insane.*—Among normal

individuals there is a sense of the mysterious. In accordance with the degree of culture, it assumes the general features of an anxiety about the unknown. Normal individuals, however, possess pre-eminently the power of discerning the real, a perceptive power or faculty of drawing inferences which, if not entirely all that could be desired, is nevertheless sufficiently practical for all human and earthly affairs. The explanation of the unknown is the province of science and of philosophy; but it is in metaphysics and the theoretical sciences especially that we confine the exercise of the sense of the mysterious. This leaves us free for the furtherance of the positive sciences and the elaboration of the practical life.

It is abnormal for the sense of the mysterious not to be thus excluded from the domain of the practical, but to manifest itself, as it were, in connection with anything and everything in life. In the doubting mania (folie de doute), for instance, question follows upon question; and as long as the doubter remains engulfed in the sense of the mysterious he is lost. The systematic psychopath organizes the mysterious and gradually builds up a false conception of the world, of society, and of himself, sufficiently strong to involve all of his utterances, his writings, his movements, and even at times to lead him into terrific outbursts of violence.

Physiological disturbances, abnormalities in connection with the proper knowledge of men and of things, and a vague consciousness of these abnormal processes constitute the material out of which is evolved the morbid sense of the mysterious; the preservation of the reasoning faculty is the active element in its evolution. According to the relative dominance of one or the other of these different factors; namely, disorder of the physio-psychological processes, confusion of the consciousness, vigor of the reasoning faculty, the patient is more or less overwhelmed in an ocean of confusion and flounders feebly about, or on the other hand reacts, interprets and forms curious deductions while carving out of the chaos, in a most summary way, certain frightful, amusing or even beautiful conceptions. And, if he is able, he organizes them and creates a perfect dream-world, elaborate in construction, monumental and absurd.

A total absence of intelligence at one end of the scale, and intact lucidity of mentalization at the other are both incompatible with a morbid sense of the mysterious. It is the mentally weak, the half-lucid, the middling-intelligent who, not fully comprehending the world or themselves, fail to recognize their own incapacity while assuming to themselves a full and perfect comprehension. If during the preoccupation of a mystic or of a victim of the persecutory obsession one converses with him, one will be struck with the fact that there is a constant intervention of the voluntary reasoning faculty. This is the cardinal trait of this psychical abnormality. The author illustrates his thesis with a detailed report of three pronounced cases.

2. *Modern Witchcraft.*—Witchcraft, sorcery and incantation are all the offspring of superstition. They are in existence to-day, though we are prone to regard them as having vanished with the fallacies of the past. The underlying cause and foundation of witchcraft are the same in all ages. In the past, as well as in the present day, it assumes various guises. To-day it masks itself under the various forms of spiritism and assumes the high-sounding name of occult science.

After presenting a brief but interesting account of ancient witchcraft and an analysis of its basic religious and phychic constituents, Marie and Viollet report in detail four striking cases. In all of them the mental instability, hysteria, ignorance and superstition of the patients or of their friends and relatives gave origin to the belief that the victims were bewitched and could only be cured, or were cured, by the well-known methods recorded in the history of mediaeval sorcery. The special danger of these modern forms of witchcraft lurks in the degenerative psychasthenia which they are prone to awaken from a latent state. They excite the predisposed and lead to disastrous results.

3. *Some Time-Reactions Among the Insane.*—According to the observations of Wundt, Hirsch, Exner, Waller, Auerbach, Binet and others the reaction period for audition, in normal individuals, varies from twelve to sixteen hundredths of a second. Buccola and Patrizzi have shown that among patients whose powers of attention are deteriorated, fatigue appears and the graphic tracings incline more quickly than among normal subjects. The general mean is more elevated, the oscillations are wider, and the subject is slower to react. These same results are obtained under general anesthesia. Janet has clearly established a characteristic reaction curve for hysteria.

In the present essay Charpentier presents the tracings obtained by him in a number of cases of mental trouble, such as mysticism, persecutory insanity, mental debility, incipient general paralysis, athysoidea, dementia præcox, melancholia, alcholic general paralysis, maniacal excitement, etc.

He concludes that these reaction curves are of some interest, but that they possess only an imperfect and approximate value. It would be an exaggeration and wholly rash to affirm that each curve has a special diagnostic value. On the other hand, when studied in conjunction with the other symptoms, such as tracing may prove, useful in indicating the patient's degree of attention. One can detect simulation and obtain thus most useful objective criteria. A simulator of hysteria, for example, produced a reaction curve wholly inconsistent with the one usually obtained in cases of genuine hysteria.

From a physiological point of view, it is of interest to note that the tracings obtained by the author are almost parallel with those obtained with the aid of the dynanometer and the ergograph of Mosso. The question is asked by the essayist; are we then to conclude that muscular phenomena and attention are identical? To answer this we need, he says, to study with greater precision than heretofore the relationship of attention, not only to muscular force and the time of reaction, but also to the circulation and the respiration in order to complete the psychophysical and psychochemical basis of attention. METTLER (Chicago).

Miscellany

DEMENTIA PRÆCOX. By W. A. White (Journal A. M. A., May 19).

Dr. White argues against the theory advanced by some authors on the basis of chemical studies, etc., that dementia præcox is caused by an autointoxication. The disease, he considers, is due to an original developmental defect, and the physical symptoms suggesting autointoxication are the result of the imperfect functioning of the nervous system.

MISLEADING SYMPTOMS IN CEREBRAL DISEASE. By J. A. Stucky (Journal A. M. A., April 28).

The author reports a case of sarcoma involving the whole right temporosphenoidal lobe, associated with and infected by chronic suppurative ethmoiditis, and asks which was the primary lesion. No macroscopic evidence existed of disease elsewhere in the brain. The local symptoms, pain and bulging of the orbit, pointed to trouble in the right fronto-orbital region, but there was aphasia (the patient was right-handed), spasm of the right arm and hand, and the tongue deviated to the right. The author asks: Could general intracranial pressure exist without motor symptoms referable to right-sided pressure and also what would have been the result had the sinus disease been eradicated months before?

PSYCHOSES RESULTING FROM COAL-GAS ASPHYXIATION. By Sanger Brown (Journal A. M. A., April 28).

The author reports a case of asphyxiation from coal gas. When the patient was found (Nov. 7) he was unconscious, his face was a deep purple and the body was entirely flaccid. He was carried to bed, and after the use